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SUBJ/PUBLIC AFFAIRS-NAVAL SERVICE MEDICAL NEWS (NSMN) (95-24)//
POC/P.C. BISHOP/CAPT/MED-00P (PUBLIC AFFAIRS)/-/TEL:(202) 653-
1315/TEL:DSN 294-1315//

RMKS/1. THIS SERVICE IS FOR GENERAL DISTRIBUTION OF INFORMATION AND NEWS OF INTEREST TO NAVY AND MARINE CORPS MEMBERS, CIVILIAN EMPLOYEES, FAMILY MEMBERS AND RETIRED BENEFICIARIES OF NAVY MEDICINE. MAXIMUM AND TIMELY REDISTRIBUTION OR FURTHER REPRODUCTION AND USE BY ACTION ADDRESSEES IS ENCOURAGED. THIS MESSAGE HAS BEEN COORDINATED WITH THE COMMANDANT OF THE MARINE CORPS (CMC). THE COMMANDANT HAS AUTHORIZED TRANSMISSION TO MARINE CORPS ACTIVITIES.

2. HEADLINES AND GENERAL INTEREST STORIES THIS WEEK:
(950190)-Gen and Mrs. Mundy Break Ground for Innovative Center
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HEADLINE: Gen and Mrs. Mundy Break Ground for Innovative Center
MCBASE Camp Pendleton, CA (NSMN) -- Ground was broken 26 May at Marine Corps Base Camp Pendleton for the Marine Corps' first drop-in day care center. The Commandant of the Marine Corps Gen Carl E. Mundy Jr. and his wife, Linda, spearheaded the efforts to bring a new concept of day care to the Marine Corps, starting at Camp Pendleton.

The day care center will provide drop-in care, rather than the long-term contractual care now available. The center "is designed to provide low-cost, hourly child care for those parents who may need to do a little shopping, attend a doctor's appointment, or just take a break from the stresses of child rearing," said Col Joseph Della-Corte, Camp Pendleton's assistant chief of staff, Military Human Resources. The hourly rate will be based on income -- \$1.50 an hour for corporals and below at the low end of the scale and an estimated \$3 an hour at the high end, which Della-Corte said had not yet been set.

The 11,000-square-foot day care center will be built with a capacity for 100 children. Construction is scheduled to begin within six months and will take six to nine months to complete,

said Della-Corte.

The center is the first of its kind not only because it will offer drop-in care only, but also because it is privately funded.

As Linda Mundy traveled with her husband and listened to the needs of Marine families, she learned of the need for child care that was inexpensive and part time. Parents who only require child care for doctor and dental appointments, to go shopping or just for a break, had few child care options in the past.

During the groundbreaking ceremonies, Mrs. Mundy told the audience, "Most of our child development centers are absolutely wonderful places. There's nothing better for children, but they're all taking care of full-time, full-day children and there's nothing for a young mom who needs to go to the doctor."

Campaigning to fill this need, Linda Mundy worked with John Rau, president of David Industries Inc., in Orange County, CA, to establish a foundation to fund such child care. After the Secretary of the Navy approved the idea in January of 1994, Rau helped establish the Sloan Foundation, which is named in Linda Mundy's honor after her maiden name. The philanthropic organization will fund the building, equipping and operating of drop-in day care centers on Marine Corps bases worldwide without cost to the government.

The chief contributors to the Sloan Foundation for the first center are Zachary and Elizabeth Fisher, who donated \$1.5 million for the construction and equipping of Camp Pendleton's drop-in day care center. The Fishers, who have given to military families since World War II, funded the Fisher Houses at several naval hospitals, which are similar to the Ronald McDonald Houses for families of patients.

Camp Pendleton was picked for the first site of this innovative child care center based on information compiled in an April to May 1994 survey of 1,200 Camp Pendleton parents. The data was sent to Headquarters, Marine Corps, by a 14-member local Process Action Team that figured the guidelines on cost, site, equipment and architectural design.

"The center, upon completion, will be operated by the Sloan Foundation and will offer care on a non-reservation basis," said Della-Corte, adding that "reservations will be taken for hospital appointments."

It will initially operate eight to 10 hours a day. The possibility of extending to evenings and weekend care is being considered, said Della-Corte. Regardless of the hours, top quality care will be the norm. "Activities offered will meet the social, emotional and physical needs of the children and will include attractive and inviting play material," said Della-Corte. Story by Cpl G. Natasha Zoe, with additional information from Cpl Marc Ayalin, reprinted from HQMC News Summary

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HEADLINE: Bremerton Wins Award in Civic Program

NAVHOSP Bremerton, WA (NSMN) -- Naval Hospital Bremerton was the recipient of the 1995 Commute Trip Reduction Goal Achievement Award, presented by the Kitsap Transit Board of Commissioners during a banquet held at the Bangor Ballroom 31 May 1995.

The Commute Trip Reduction Program, which has been in effect for two years, assesses progress made by Kitsap County's major employers (employing 100 or more) in reducing the number of commute trips made by sole occupancy vehicles.

Naval Hospital Bremerton is one of 30 employers in the county to be ranked in the major employer category. Of those, 14 met or exceeded their goal and received awards.

Each employer's goal is figured on a base calculated by the Board of Commissioners, which determined that an average of 85 percent of all employees were driving sole occupied vehicles (SOV) when the program started in 1993. At that time, the naval hospital was already below the average with a 77 percent SOV rate. The hospital's goal for 1995 was set at 72 percent, but was substantially exceeded. At the end of the rating period (February 1995), the naval hospital had a low of 67 percent of their staff driving solo.

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HEADLINE: Naval Hospital Guantanamo Bay Hosts ROTC Students

USNH Guantanamo Bay, Cuba (NSMN) -- Second and third year naval ROTC nursing students participating in a training evolution aboard USS Saipan (LHA 2) visited U.S. Naval Hospital Guantanamo Bay 7-9 June 1995. Assigned to Nurse Corps preceptors, they participated in a brief clinical orientation to inpatient, perioperative and operational nursing at McCalla and Buckeley Migrant medical clinics, which provided a unique learning opportunity.

The midshipmen were Renee LaRosa, Villanova University; Mararita Rocha, Loyola University; Camellia McKinney, Prairie View A&M; Marybeth O'Sullivan, Boston College; Carly Young, Norwich University; and Nikki Koenig, Boston College. They are participating in their summer cruise as part of the ship's company aboard Saipan.

-USN-

HEADLINE: The Hard Facts About Your Skeleton

USNH Yokosuka, Japan (NSMN) -- Remember the old song, "the hip bone's connected to the thigh bone, the thigh bone's connected to the shin bone ..."? It was a long song -- there are more than 200 bones in our bodies, 206 to be exact, and all of them are strategically connected and placed to form our skeleton. Your head alone is made up of 28 bones.

Our bones start forming as early as 8 weeks in the fetus. Initially, the bone starts out as soft cartilage and gradually it is replaced by harder bone. This process is not completed until well after the baby is born, as evidenced by the "soft spots" or fontanels, of a baby's skull. By puberty, the ossification (bone building) process should be completed. The process is so exact that it is said the age of a child can be determined just by an X-ray.

Bones come in all shapes and sizes, and each has its own special job. The smallest bones in our body are in our ears. Technically, they're called the incus, malleus and stapes, but are better known to most of us as the hammer, anvil and stirrup.

because of their unique shapes. Each of these six bones is no bigger than an eyeglass screw, yet when positioned correctly they miraculously allow us to hear.

The largest, longest, heaviest and strongest bone in the body is the femur, or thigh bone. One of its many important jobs is to support the upper body, but we shouldn't be lulled into thinking the only important job of the skeleton is support. Think of your bones as protectors, manufacturers and storers as well.

There is soft bone, or cancellous bone, which is spongy and lightweight, and there is hard, cortical bone, which is dense and heavy. The skeleton uses dense bone to protect the soft structures in our body. The skull protects our brain, eyes and ears, the rib cage protects our heart, lungs, liver and stomach and the pelvic bones protect the bladder, uterus and bowel. The dense outer bone also protects the soft inner bone, which has its own special functions.

Inside the bones is something called the red marrow and the yellow marrow. The red marrow is found in only a certain few of the skeleton's bones -- the skull, rib cage, spine and pelvis. It is the most important of the two, as it is the only source that manufactures some very important cells, the first being red blood cells. Red blood cells are responsible for carrying oxygen throughout your body. If the red marrow isn't functioning properly, a condition known as anemia occurs.

The second most important cells manufactured by the red marrow are white blood cells. The body needs white blood cells to fight infection, but the production of too many white cells causes leukemia, a form of cancer.

The third most important cell element made by the red marrow is the platelet. Platelets are necessary for a blood clot to form properly. Too many of these cells may clog up important vessels and too few of them may contribute to easy bruising and prolonged bleeding.

The last function of the bones I will mention is the storage of certain minerals, specifically calcium. A lack of calcium causes brittle bones and heart problems, especially in the elderly. Too much may also cause heart problems, as well as thyroid problems.

Your skeleton is a vital living, highly organized structure and deserves your respect and admiration -- without it, we wouldn't exist.

Story by LT S. Jarvis, NC, U.S. Naval Hospital Yokosuka

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HEADLINE: Health Status of U.S. Adolescents Continues to Decline
AMA Chicago (NSMN) -- Violence, substance abuse and the consequences of unprotected sex are the biggest problems facing American adolescents, according to an article in a recent issue of The Journal of the American Medical Association (JAMA).

The article, by Michele D. Wilson, MD, and Alain Joffe, MD, MPH, both from Johns Hopkins University School of Medicine in Baltimore, MD, appears in the annual JAMA Contempo issue, which updates research in various medical specialties.

Wilson and Joffe write: "Despite increased attention, violence continues to cause major health problems for adolescents."

They cite one survey which shows that one-in-four children, aged 10-16, had experienced an assault or abuse in the previous year. The victimization included assault by nonfamily or a family member, kidnapping, sexual abuse or assault, and violence to the genitals.

Another survey shows violence against children and young adults is not restricted to inner cities. In fact, the survey finds a higher percentage of suburban boys reporting being hit or punched at school in the previous year than boys in the inner city.

A third survey shows that 10 percent of eighth- and 10th-grade students say they had experienced forced sex or sexual abuse. That abuse was associated with other risky behaviors, including the use of alcohol and other illicit drugs, believing it is "OK" to have several sex partners, having been pregnant or having caused a pregnancy, having suicidal tendencies, and having experienced violence or having carried a weapon.

Wilson and Joffe write: "Taken together, these three surveys emphasize the need for increased efforts toward prevention, especially primary prevention, of various forms of violence occurring among adolescents. Further efforts should be directed at identifying those youths who have experienced sexual abuse and other forms of violence in an attempt to address the resultant emotional trauma and prevent or minimize associated risky health behaviors."

The authors also express concern about drug use: "With new data indicating that marijuana use among eighth graders has more than doubled since 1991 and that there is an overall increase in drug use among teenagers, efforts must continue to identify both risk and protective factors related to adolescents' use of alcohol and other drugs."

In addition, they cite statistics showing that approximately 1.1 million girls, aged 15-19, became pregnant in 1991. That was the highest teenage-pregnancy rate among the developed nations. While studies have shown that oral contraceptives remain the preferred method of contraception for teens, between 45 and 66 percent of adolescents discontinue oral contraceptive use within a year.

Wilson and Joffe suggest that new methods of birth control (such as Norplant and DepoProvera, which are highly effective, long-acting and require little attention on the part of the teenager), coupled with effective school- and community-based behavioral interventions which stress the use of barrier methods (condoms) in conjunction with hormonal methods, can significantly reduce the rate of unintended teenage pregnancies in the United States as well as curtail the spread of sexually transmitted diseases.

The authors say these latest studies support American Medical Association Guidelines for Adolescent Preventive Services which encourage practitioners to provide anticipatory guidance for parents that will assist them in developing strategies that

promote healthy adjustment of and deter development of detrimental behaviors by their teenager.

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HEADLINE: HEALTHWATCH: Protect Your Hearing

NAVHOSP Jacksonville, FL (NSMN) -- Noise induced hearing loss may be the most widespread potential health hazard facing active duty and civilian personnel within the Navy and Marine Corps.

Nationally, more than five million workers are exposed to hazardous noise and more than one million have suffered significant hearing loss as a result of noise exposure. Hazardous noise is any continuous sound that exceeds 84 decibels or any brief (impact) sound that exceeds 140 decibels.

The decibel is an arbitrary unit of loudness. It doesn't matter whether you're hearing a chainsaw or amplified music, at levels above 84 decibels, you are at risk of developing a noise induced hearing loss. A noise induced hearing loss is typically painless and so gradual that it goes unnoticed in the early stages. Later, victims may complain that speech is hard to understand and often resort to asking others to repeat themselves.

With proper precautions, hearing loss due to noise is preventable. The use of properly fitted hearing protective devices (HPDs), available at your medical department, provides excellent hearing protection and comfort. If you wear your HPDs and receive monitoring audiograms on schedule, you could avoid a permanent hearing disorder. Ears don't get toughened or "used to" noise; deafness takes place.

Everyone gradually loses some hearing as they get older. But, if you add noise induced hearing loss during your career, what's it going to be like when you retire? If you protect your precious gift of hearing today, a hearing aid might not be needed tomorrow.

Story by LCDR J. Saul, MSC, audiologist, Naval Hospital Jacksonville

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3. Events, observances and anniversaries, 17-28 June:

1 June - 4 July: Fireworks Safety Month (Prevent Blindness America, 1-800-331-2020)

17 June 1898: Hospital Corps Established

18 June: Father's Day

21 June, 1634 EDT: Summer Solstice

23 June 1845: Texas Admitted to the Union

24 June 1665: First NYC Mayor Installed

25 June - 1 July: Helen Keller Deaf-Blind Awareness Week (516/944-8900, ext. 325)

27 June: Helen Keller's birthday

27 June: Morning (0600-0800) and Night (till 2200)

Detailing (Washington, DC, time)

30 June: E-4 Evaluations Due

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HEADLINE: CJCS Sends Independence Day Message

CJCS Washington (NSMN) -- Every year on the Fourth of July, we celebrate the anniversary when, in 1776, members of the Second Continental Congress adopted the Declaration of Independence and stated, "We mutually pledge to each other our lives, our fortunes, and our sacred honor."

We combine the ideals of citizenship with the patriotic spirit of this day to recognize the democratic principles on which our great nation was founded -- "that all men are created equal, that they are endowed by their creator with certain unalienable rights, that among these are life, liberty and the pursuit of happiness."

You, the members of the Armed Forces, are the vanguards of freedom that the founding fathers envisioned. Often your missions and selfless service take you far from home, on bases, ships and posts around the globe. Your dedication in facing challenges and the American "can-do" spirit are shining examples in defending our great nation and safeguarding the world's democratic ideals.

We must also pause to remember our comrades who have made the supreme sacrifice, who have become captives of the enemy, or still remain unaccounted for while serving in our Armed Forces.

Americans everywhere enjoy the holiday traditions by flying "Old Glory," participating in parades, attending picnics with family and friends, watching traditional fireworks displays and showing appreciation for the liberty we, as U.S. citizens, cherish.

On behalf of the Joint Chiefs of Staff, I extend best wishes to all men and women in uniform, their civilian colleagues, and their families for a happy and safe Independence Day.

Signed General John M. Shalikashvili, Chairman of the Joint Chiefs of Staff

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4. Professional Notes: Information on upcoming symposiums, conferences or courses of interest to Navy Medical Department personnel and wrap-ups on ones attended. Anyone with information to share in this section should contact the editor (see the last paragraph of this message on ways to do so).

Scheduled Meetings:

-- 19-22 June, Third Annual NAVSEA/NAVSUP International Logistics Symposium, "Logistics Teaming for International Defense," Hyatt Regency Hotel, Arlington, VA. Contact Sally Cook, ASNE, (703) 836-6727, for registration information.

-- 20-24 June, Annual Scientific Meeting, Undersea and Hyperbaric Medical Society, Breakers Hotel, Palm Beach, FL; (301) 942-2980.

-- 22-25 June, 15th Annual Health Reporting Conference, The Sutton Place Hotel, Newport Beach, CA. For more information, contact Jill Stewart, AMA, 515 N. State, Chicago, IL 60610; (312) 464-5843.

-- 23-25 June, American Congress of Rehabilitation Medicine, Hyatt Regency Hotel-Crystal City, Arlington, VA; (708) 966-0095.

-- 8-12 July, 96th Annual Meeting of the American

Association of Colleges of Pharmacy, Philadelphia Marriott; (703) 739-2330.

-- 15-21 July, National Wellness Conference, National Wellness Institute, University of Wisconsin, Stevens Point, WI. For more information, contact Jill Villnow, Director of Conferences, National Wellness Institute, 1045 Clark St., Suite 210, P.O. Box 827, Stevens Point, WI 54481-0827; (715) 342-2969.

-- 18-23 July, 23rd Annual National Training Conference (Symposium), "Excellence Through Mentoring, Training and Professionalism," National Naval Officers Association (NNOA), Holiday Inn Executive Center, Virginia Beach. For registration application, call 1-800-772-6662. Navy POC is CDR Ruby Miller, DSN 227-1022 or (703) 697-1022.

-- 29 July - 3 August, 100th Annual National Medical Association Convention, Marriott Marquis, Atlanta, GA; (202) 347-1895.

-- 11-15 August, 103rd Annual Convention of the American Psychological Association, New York Hilton; (202) 336-6020.

-- 19-25 August, 12th Annual Meeting and Exhibition of the European Society for Magnetic Resonance in Medicine and Biology and the Third Scientific Meeting and Exhibition of the Society of Magnetic Resonance, held jointly, Nice, France. For information, contact the Society of Magnetic Resonance, 2118 Milvia St., Suite 201, Berkeley, CA 94704; (510) 841-1899.

-- 21-23 August, American Hospital Association Annual Convention and Exhibition, San Francisco, CA; (312) 422-2136.

-- 27-30 August, 11th Meeting of the International Society for STD Research, New Orleans Marriott; 1-800-642-2515.

-- 16-19 September, 17th Annual Educational Conference and Trade Show, American Society of Healthcare Marketing and Public Relations, Dallas, TX; (312) 422-3740.

-- 9-11 November, The Integrated Function of the Lumbar Spine and Sacroiliac Joints, San Diego. For information, contact the Office of Continuing Medical Education, University of California, San Diego, School of Medicine, 9500 Gilman Dr., La Jolla, CA 92093-0617; (619) 534-3940.

-- 3-8 March 1996, Association of Military Osteopathic Physicians and Surgeons, Tropicana Hotel and Casino, Las Vegas; (407) 368-2306.

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HEADLINE: Abstracts Due for Nursing Research Poster Session

BUMED Washington (NSMN) -- The abstract submission deadline has been extended to 15 August 1995 for the Eighth Annual Karen A. Rieder Nursing Research Poster Session. This research forum will be held 30-31 October 1995 in Anaheim, CA, during the 102nd Annual Meeting of the Association of Military Surgeons of the United States (AMSUS). Registered nurses in the federal services and the American Red Cross are invited to submit abstracts about research initiated or completed within the past five years. Send your original abstract along with 10 copies to LCDR Sandra Cupples, NC, USNR, 9104 Wooden Bridge Rd., Potomac, MD 20854-2414. No faxed copies will be accepted. Notification of acceptance with further instructions will be sent as soon as

possible, but no later than 31 August 1995. Questions may be directed to LCDR Cupples during normal office hours at (301) 295-2724; DNS 295-2724, or to LCDR Ken Miller, NC, (301) 295-4088; DSN 295-4088.

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5. ADDRESSEES ARE ENCOURAGED TO SUBMIT INFORMATION AND NEWS ITEMS OF MEDICAL DEPARTMENT OR BENEFICIARY INTEREST (IN STORY FORMAT) BY TELEPHONE, FAX OR E-MAIL TO BUMED, ATTN: EDITOR, NAVAL SERVICE MEDICAL NEWS (MED 00P2). TELEPHONE (202) 653-0793, DSN 294-0793. FAX (202) 653-0086, DSN 294-0086. E-MAIL NMC0ENL@BUMED10.MED.NAVY.MIL//

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